



## Bid Notice Abstract

### Request for Quotation (RFQ)

**Reference Number** 6476130  
**Procuring Entity** DEPARTMENT OF TOURISM  
**Title** Procurement of Medicines, Supplies and Equipment for the DOT Medical Clinic  
**Area of Delivery**

<b>Solicitation Number:</b> 2019-09-0220 <b>Trade Agreement:</b> Implementing Rules and Regulations <b>Procurement Mode:</b> Negotiated Procurement - Small Value Procurement (Sec. 53.9) <b>Classification:</b> Goods <b>Category:</b> Medical Supplies and Laboratory Instrument <b>Approved Budget for the Contract:</b> PHP 160,000.00 <b>Delivery Period:</b> <b>Client Agency:</b>	<b>Status</b>	<b>Active</b>
	<b>Associated Components</b>	3
	<b>Bid Supplements</b>	0
	<b>Document Request List</b>	1
	<b>Date Published</b>	18/09/2019
	<b>Last Updated / Time</b>	18/09/2019 00:00 AM
	<b>Closing Date / Time</b>	23/09/2019 10:00 AM
	<b>Contact Person:</b> John Paulo Samonte Francisco Administrative Officer I 351 Sen. Gil Puyat Avenue Makati City Metro Manila Philippines 1200 63-02-4595200 Ext.425 63-02-4595200 psfrancisco.logistics@yahoo.com	

#### Description

TECHNICAL SPECIFICATIONS  
 MEDICINES, SUPPLIES AND EQUIPMENT FOR THE DOT MEDICAL CLINIC

#### I. SPECIFICATIONS:

##### A. MEDICINES

Lot no. Unit Medicine Quantity

##### ANTIBACTERIALS

- 1 Cap Cloxacillin 500mg/cap 500
- 2 Tab Clarithromycin 500mg/tab 1000
- 3 Tab Ciprofloxacin 500mg/tab 750
- 4 Tab Clindamycin 300mg/tab 300

##### CARDIAC MEDICINES

- 5 Tab Losartan 100mg/tab 1500
- 6 Tab Amlodipine 10mg/tab 3000
- 7 Tab Clonidine 75mcg/tab 100

##### ANTI LIPIDEMIC

- 8 Tab Simvastatin 40mg/tab 300
- 9 Tab Atorvastatin 40mg/tab 350

##### ANTI-DIABETIC

- 10 Tab Metformin 500mg/tab 2000

##### ANALGESIC/ANTI/INFLAMMATORY

- 11 Tab Mefenamic Acid 500mg/tab 700
- 12 Tab Paracetamol 500mg/tab 750
- 13 Tab Paracetamol + Ibuprofen 500

##### RESPIRATORY MEDICINES

- 14 Tab Phenylephrine HCl + Paracetamol Non-Drowsy 10mg/500mg tab 1000

15 Tab Chlorpheniramine Maleate 2 mg + Paracetamol 500mg + Phenylpropanolamine 20 mg 500  
16 Tab N Acetylcysteine 600mg/tab 100  
GASTROINTESTINAL MEDICINES  
17 Tab Aluminum Hydroxide 178mg + Magnesium Hydroxide 233mg + Simeticone 30 mg tab 250  
18 Cap Loperamide 2mg/cap 750  
19 Tab Domperidone 10mg/tab 150  
20 Tab Omeprazole 40mg/tab 500  
ANTI HISTAMINES  
21 Tab Cetirizine 10mg/tab 250  
EENT MEDICINES  
22 Tab Betahistine Dihydrochloride 16mg/tab 500  
23 Bot Tobramycin Eye Drops 5ml/bot. 5  
24 Bot Fluocinolone Acetonide 250mcg + Neomycin Sulfate 3.5 mg + Polymyxin B Sulfate 10,000 u Otic Drops 5ml/bot. 5  
25 Bot Eye Drops (Naphazoline HCl 0.01%) 5  
VITAMINS/SUPPLEMENT  
26 Bot. Multivitamins with Iron tab. 500  
27 Tab Calcium Supplement 600mg/tab 500  
28 Tab Ascorbic Acid 500 mg 750  
ANTI ASTHMA MEDICINES  
29 Neb. Salbutamol/Ipratropium 2.5ml/neb 20

**B. MEDICAL SUPPLIES and EQUIPMENT:**

**Lot no. UNIT SUPPLIES/EQUIPMENT QUANTITY**

1 Box Gauze Pad 2 x 2/ box (100 pcs) 1  
2 Box Gauze Pad 4x 4/ box (100 pcs) 1  
3 Box Band Aid/ box (100 pcs) 2  
4 Box Gloves (non-sterile)/ box (100 pcs) 3  
5 Box Face mask (50pcs/box) 3  
6 Piece Elastic bandage 2 in. 20  
7 Piece Elastic bandage 4 in. 20  
8 Tube Mupirocin Ointment 5g/tube 4  
9 Tube Lubricant 150g/tube 2  
10 Piece Aneroid BP app. with wheels 1  
11 Piece Master Cardiology Stethoscope 1

**NOTE:**

• Partial bids are allowed. All goods are grouped in lots listed above. Bidders shall have the option of submitting a proposal on any or all lots and evaluation and contract award will be undertaken on a per lot basis. Lots shall not be divided further in to sub-lots for the purpose of bidding, evaluation and contract award.

**DELIVERY REQUIREMENTS:**

**For Medicines:**

- Delivery of medicines to DOT Main Office at Makati City
- Supplier of medicines should be FDA registered; medicines should have FDA certifications.
- Expiration dates of the purchased medicines should be at least two (2) years after the delivery date

**For Medical Supplies/Equipment:**

- Medical equipment (BP Apparatus, Stethoscope) should have 1 year warranty
- Delivery of Medical supplies/equipment to DOT Main Office at Makati City

**III. PAYMENT PROCEDURE: Memorandum of Agreement  
Procedure – Send Bill Arrangement**

**IV. BUDGET ESTIMATE: P 160,000.00**

**VI. CONTACT PERSON: DR. RAUL S. ALCANTARA/Mr. ALVIN RECELLA  
Tel. No. (02) 4595200 Local # 220  
DOT Medical Clinic – Main**

Note: The winning bid shall be determined based on the proposal with the most advantageous financial package cost provided that the amount of the bid does not exceed the above total budget.

Kindly submit your quotation for the purchase of the above requirement, indicating our Solicitation Number & your Company Name in a SEALED ENVELOPE, addressed to Mr. John Paulo S. Francisco at DOT Bldg., 4th Floor, Procurement Management Division, 351 Sen. Gil Puyat Avenue, Makati City

**PLEASE SUBMIT THE FOLLOWING DOCUMENTS:**

1. Current Mayor's/Business Permit/BIR Certification of Registration (Individual) (In case of recently expired Mayor's/Business permit, submission of the expired Mayor's/Business permit together with the Official Receipt (renewal) shall be accepted.
2. Philgeps Registration Number

3. Latest Income/Business Tax Return (For ABCs above Php500K)
4. Original or Certified True copy of Duly Notarized Omnibus Sworn Statement (see attached form)

Deadline for the submission of Quotation: on or before September 23, 2019 at 10:00 am

**Created by** John Paulo Samonte Francisco

**Date Created** 17/09/2019

The PhilGEPs team is not responsible for any typographical errors or misinformation presented in the system. PhilGEPs only displays information provided for by its clients, and any queries regarding the postings should be directed to the contact person/s of the concerned party.